

SERIAL NUMBER <div style="text-align: center;">09/240,250</div>	FILING DATE <div style="text-align: center;">01/29/99</div>	CLASS <div style="text-align: center;">709</div>	GROUP ART UNIT <div style="text-align: center;">2756</div>	ATTORNEY DOCKET NO.
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APPLICANT

BRIAN BOESCH, OAK HILL, VA.

****CONTINUING DOMESTIC DATA*******
 VERIFIED

****371 (NAT'L STAGE) DATA*******
 VERIFIED

****FOREIGN APPLICATIONS*******
 VERIFIED

FOREIGN FILING LICENSE GRANTED 02/17/99
***** SMALL ENTITY *****

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ <div style="display: flex; justify-content: space-between;"> Examiner's Initials _____ Initials _____ </div>	STATE OR COUNTRY <div style="text-align: center;">VA</div>	SHEETS DRAWING <div style="text-align: center;">8</div>	TOTAL CLAIMS <div style="text-align: center;">79</div>	INDEPENDENT CLAIMS <div style="text-align: center;">14</div>
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ADDRESS

~~JON J ROBERTS~~
~~ROBERTS & ABOKHAIR~~
~~8381 OLD COURTHOUSE ROAD~~
~~SUITE 212~~
~~VIENNA VA 22182~~

22208

TITLE

SYSTEM AND METHOD FOR E-MAIL INVOKED ELECTRONIC COMMERCE USING A WALLET

FILING FEE RECEIVED <div style="text-align: center;">\$1,340</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>
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